Or027v01 Streamlined Annual Plan for Fiscal Year 2011 Housing Authority of Malheur County OR027



Prepared by the Housing Authority of Malheur County Merlene Bourasa, Executive Director 959 Fortner Street Ontario, Oregon 97914 (541) 889-9661/Fax: (541)889-6487

PHA 5-Year and Annual Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information	est sail s				
	PHA Name: Housing Authority of Ma			PHA Code	: <u>OR027</u>	
	PHA Type: Small High PHA Fiscal Year Beginning: (MM/YYYY):	Performing	☐ Standard	☐ HCV (Section 8)		
	111/11/15cm 1cm Deginning. (why 1111).	10/2011				
2.0	Inventory (based on ACC units at time of F	Y beginning i				
	Number of PH units: 40	-		imber of HCV units: 349		
3.0	Submission Type	M Annual T	Olon Only	5 Voor Dlan Only		
	5-Year and Annual Plan	Annual F	rian Only	5-Year Plan Only		
4.0	PHA Consortia	UA Consortio	a: (Check box if submitting a join	nt Dlan and complete table held	· · · · ·	
	PHA Consortia	TIA CONSOLUE	i. (Check box if sublifitting a join	it Fian and complete table bed		
		PHA	Program(s) Included in the	Programs Not in the	No. of Unit	s in Each
	Participating PHAs	Code	Consortia	Consortia	Program	LION
	ESSA I				PH	HCV
	PHA 1:					
	PHA 2: PHA 3:	-			-	-
5.0					1	
5.0	5-Year Plan. Complete items 5.1 and 5.2 or	ıly at 5-Year l	Plan update.			
5.1	Mission. State the PHA's Mission for servi					
	jurisdiction for the next five years:. The Ho					
	those it serves through the provision of de					nvironment
	free from discrimination, while promoting	g dignity and	family self-sufficiency in the p	process for the next five years		
5.2	Goals and Objectives. Identify the PHA's	quantifiable g	oals and objectives that will ena	ble the PHA to serve the needs	of low-incom	e and very
	low-income, and extremely low-income fam					
	and objectives described in the previous 5-Y					
	available, maintain occupancy rates at 98 Expand the HAMC homeownership prog					
	Program, Maintain high performer score					
	families in Malheur and Harney County i					

	Progress Report					
	The HAMC continues to achieve Will-L. D.	ouformer Ct.	tue" and will continue to main	tain this payformanas vettue	for the next fi	ivo voore
	The HAMC continues to achieve "High P Our Public Housing units have continued					
	will continue to manage successfully the S					11111110
	Elderly/Disabled RD project located in V	ale, Oregon,	and considering another HUD	project coming available in	Ontario of 13	units of
	Multi Family. We are soon to host severa	l housing for	ums with another agency to id	lentify the housing needs for	Harney Count	ty.
	DITA DI II. J. (***************************************		
	PHA Plan Update					
6.0	(a) Identify all PHA Plan elements that hav	e been revised	by the PHA since its last Annu	al Plan submission: Capital I	mprovement N	Needs
	successfully completed to Low Rent Publi	ic Housing U	nits and ACOP and Section 8	Administrative Plan updates.	All documen	ts are
	available for public review and inspection	1.				
	(b) Identify the specific location(s) where the					
	elements, see Section 6.0 of the instruct			Authority of Malheur Count	ly, 959 Fortne	r Street,
	Ontario, Oregon 97914; Malheur and	1 Harney Cou	unty Courthouse.			
7.0	Hope VI, Mixed Finance Modernization of	or Developme	ent, Demolition and/or Disposi	tion, Conversion of Public H	ousing, Home	ownership
	Programs, and Project-based Vouchers.				Θ,	- W. (1997 - 1997 F)
	T20 37 T		• 5	G.67		
8.0	Capital Improvements. Please complete P	arts 8.1 throu	gh 8.3, as applicable. See Exhil	bits 1		

8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing. See Exhibits 1
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Exhibits 1
8.3	Capital Fund Financing Program (CFFP). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. N/A
9,0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The HAMC is working very closely with all partners that assist with the needs of the low and very low-income families. Every outreach effort will be made to ensure we continue with our goal of assisting these families with their housing needs through development opportunities and expansion of existing services if they become available. The HAMC presently has 404 families that could have as long as a two year waiting period to be housed. Information based on our review 24.75% are Handicapped/Disabled households.
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Through newsletters, personal contact and continued staff training the HAMC will be able to develop better communication and rapport with all program clientele. Continued both internal and external training will be provided to staff to help ensure their continued development.
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested.
	 (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
	 (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)

HAMC VAWA POLICY

(g) Challenged Elements

The HAMC VAWA Policy provides that "criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of the tenancy or occupancy rights, if the tenant or immediate family member of the tenant's family is the victim or threatened victim of that abuse." The HAMC VAWA Policy further provides that incidents of actual or threatened domestic violence, dating violence, or stalking may not be construed either as serious or repeated violations of the lease by the victim of such violence or as good cause for termination the tenancy or occupancy rights of the victim of such violence.

(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

(h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)

(d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)

(e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)

(i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

If the HAMC can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the tenant's tenancy is not terminated, the HAMC will bypass the standard process and proceed with the immediate termination of the family's lease.

When a victim notifies the HAMC it will be reviewed and a determination made as to what steps the HAMC will assist with relocation of the victim, if necessary. The HAMC will ensure the victim is referred to other local agencies that may be able to assist.

HAMC Signification Amendment and Substantial Deviation/Modification

The HAMC defines substantial deviation as: significant amendments or modifications to the annual plan, which materially impact the goal and objectives of the five-year plan. This would include any changes in the mission statement or a major revision or abandonment of one or more of the goals in the five-year plan. It would not include a delay in the implementation of any particular component caused by business needs or deviations based on emergencies or circumstances out of the HAMC's control. Includes admissions preferences, demolition or disposition or conversion programs. Discretionary or administrative amendments consonant with the HAMC's state overall mission and basic objectives will not be considered substantial deviations or significant modifications.

Significant Amendment or Modification to the Annual Plan

After submitting the five-year plan or annual plan to HUD, the HAMC may amend or modify any policy, rule, regulation or other aspect of the plan. Each signification amendment or modification to a plan submitted to HUD is subject to the requirements of 903.13, 903.15, and 903.17. If the amendment or modification is a significant amendment or modification, the HAMC:

- a. May not adopt the amendment or modification until the HAMC has duly called a meeting of its Board of Commissioners and the meeting, at which the amendment or modification is adopted, is open to the public; and
- b. May not implement the amendment or modification until notification of the amendment or modification is provided to HUD and approved by HUD in accordance with HUD's plan review procedures, as provided in 903.23.

The following items will be considered as significant amendments or modifications to the annual plan and accordingly, will require the above process prior to adoption:

- a. Changes to rent policies or admission preferences
- b. Additions of non-emergency work items (items not included in the current Annual Statement or Five-Year Action Plan under the Capital Fund
- c. Any change with regard to proposed public housing demolition or disposition, designation, conversion activities, or ownership of public housing units.

Exceptions to these definitions will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements or other mandated regulatory changes such as building codes, health codes, etc., such changes will not be considered significant amendments by HUD.

Exhibits

Index

HUD Form – 50077

HUD Form - 50070

HUD Form – 50071

SF-LLL

Certificate of Consistency
Resident Advisory Board Comments
Challenged Elements – None Received
HUD Form – 50071.1 for FY 2009; FY 2010; FY
2011

HUD Form - 50075.2 Five Year Action Plan

PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Resolution R-2011-2

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ____ 5-Year and/or X__ Annual PHA Plan for the PHA fiscal year beginning _2011______, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a
 pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:

Previous version is obsolete

- (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
- (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
- (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Housing Authority of Malheur County PHA Name	OR027 PHA Number/HA Code
5-Year PHA Plan for Fiscal Years 20 20	
I hereby certify that all the information stated herein, as well as any information provid prosecute false claims and statements. Conviction may result in criminal and/or civil per .	led in the accompaniment herewith, is true and accurate. Warning: HUD will enalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Name of Authorized Official	Title
Ken Heninger	Chairman HAMC Board
Signature	Date July 14, 2011

Page 2 of 2

form HUD-50077 (4/2008)

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

•	OR027
3	PHA Number/HA Code
information prov	ovided in the accompaniment herewith, is true and accurate. Warning: HUD will ril penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
mmar and/or civii	II pelimines. (10 0.0.0. 1001, 1010, 1012, 51 0.0.0. 5127, 5002)
Heninger	Title Chairman, HAMC Board
	Date 07/12/2011
	ninal and/or civ

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name	
Housing Authority of Malheur County Program/Activity Receiving Federal Grant Funding	
Low Rent Public Housing and Section 8 Voucher Rental Assista	200
Low Rent Fubile Housing and Section 6 Voucher Rental Assistan	
Acting on behalf of the above named Applicant as its Authorize the Department of Housing and Urban Development (HUD) regard	ed Official, I make the following certifications and agreements to ling the sites listed below:
I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	(1) Abide by the terms of the statement; and(2) Notify the employer in writing of his or her convic-
a. Publishing a statement notifying employees that the un- lawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's work- place and specifying the actions that will be taken against employees for violation of such prohibition.	tion for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction; e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction.
b. Establishing an on-going drug-free awareness program to inform employees	Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on
(1) The dangers of drug abuse in the workplace;	whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the
(2) The Applicant's policy of maintaining a drug-free workplace;	receipt of such notices. Notice shall include the identification number(s) of each affected grant;
(3) Any available drug counseling, rehabilitation, and employee assistance programs; and	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	to any employee who is so convicted (1) Taking appropriate personnel action against such an
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement	employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
required by paragraph a.; d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
	g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.
2. Sites for Work Performance. The Applicant shall list (on separate particles of HUD funding of the program/activity shown above: Place of Perform Identify each sheet with the Applicant name and address and the program.	nges) the site(s) for the performance of work done in connection with the nance shall include the street address, city, county, State, and zip code. gram/activity receiving grant funding.)
Housing Authority of Malheur County 959 Fortner Street Ontario, Oregon 97914	
Check here if there are workplaces on file that are not identified on the attack	hed sheets.
I hereby certify that all the information stated herein, as well as any info Warning: HUD will prosecute false claims and statements. Conviction may (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	san manda da magalang sandam - akki in ami ini ing kanasan san sana pamasan san aman mana mananan an ama sanasan a m
Name of Authorized Official Merlene Bourasa	Title Executive Director
Signáture	Date May 28, 2011
Deffulle Versan	May 20, 2011

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Housing Authority of Malheur County		
Program/Activity Receiving Federal Grant Funding Low Rent Public Housing and Section 8 Voucher Rental Assista	nce	
The undersigned certifies, to the best of his or her knowledge and	d belief, th	at:
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement. (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	certific at all and and all and and all and	the undersigned shall require that the language of this ation be included in the award documents for all subawards iers (including subcontracts, subgrants, and contracts grants, loans, and cooperative agreements) and that all pients shall certify and disclose accordingly. Trification is a material representation of fact upon which was placed when this transaction was made or entered abmission of this certification is a prerequisite for making ring into this transaction imposed by Section 1352, Title S. Code. Any person who fails to file the required ation shall be subject to a civil penalty of not less than 0 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any integration with the work of t		
Name of Authorized Official	Title	
Merlene Bourasa	Executi	ve Director
Signature	I	Date (mm/dd/yyyy)
		05/28/11

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

1. Type of Federal Action: 2. Status of Federal Action: 3. Report Type: a. bid/offer/application a. contract a. initial filing b b. grant b. initial award b. material change c. cooperative agreement c. post-award For Material Change Only: d. loan quarter year e. loan guarantee date of last report f. loan insurance 4. Name and Address of Reporting Entity: 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: × Prime Subawardee Tier _____, if known: Congressional District, if known: 4c Congressional District, if known: 6. Federal Department/Agency: 7. Federal Program Name/Description: US Department of Housing & Urban Development CFDA Number, if applicable: _____ 8. Federal Action Number, if known: 9. Award Amount, if known: 10. a. Name and Address of Lobbying Registrant b. Individuals Performing Services (including address if different from No. 10a) (if individual, last name, first name, MI): Housing Authority of Malheur County (last name, first name, MI): 959 Fortner Street Ontario, Oregon 97914 11. Information requested through this form is authorized by title 31 U.S.C. section Signature; 1352. This disclosure of lobbying activities is a material representation of fact Print Name: Merlene Bourasa upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the Title: Executive Director required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. 5/28/11 Telephone No.: (541) 889-9661 ext. 3011 Date: Authorized for Local Reproduction Federal Use Only: Standard Form LLL (Rev. 7-97)

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, Rick Crager, Acting Director, Oregon Housing and Community Services, certify that the 2011 Annual PHA Plan and 2010- 2016 5 Year Plan of the Housing Authority of Malheur County is consistent with the Consolidated Plan of Oregon 2011-2015 prepared pursuant to 24 CFR Part 91.

Acting Director, Oregon Housing & Community Services

Date

MINUTES FROM THE RESIDENT ADVISORY BOARD MEETING PHA PLAN UPDATE FOR FISCAL YEAR 2011 OF THE HOUSING AUTHORITY OF MALHUER COUNTY HELD June 22, 2011

The Resident Advisory Board (RAB) met to review and discuss the Housing Authority of Malheur County's PHA Plan update for Fiscal Year 2011. The meeting was held at 3:00 p.m. June 22, 2011 at the Housing Authority of Malheur County Conference Room, Ontario, Oregon.

PRESENT:

The meeting was called to order with the following Resident Advisory Board members in attendance:

Penny Kennison – Public Housing Participant and Tenant Commissioner Barbara Ann Hart – Absent Alberta Savala – Absent

Housing Authority Staff in attendance: Merlene Bourasa, Executive Director

Guests Present:

None

Director of Internal Operations Review of PHA Plan for Fiscal Year 2011.

Though the PHA Plan for Fiscal Year 2011, had no significant changes Mrs. Bourasa highlighted the PHA Plan mission and goals, our financial resources, highlighted the several programs the agency is involved with, plans to expand homeownership opportunities for low income families and attachments along with supporting documents.

RAB Comments and Suggestions - None received

Adjournment:

Mrs. Bourasa adjourned the meeting at: 4:00 pm., June 22, 2011 at the Housing Authority of Malheur County Conference Room.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226 Expires 4/30/2011

Part I: S	Part I: Summary			
PHA Name: Hou Malheur County	PHA Name: Housing Authority of Malheur County Capital Fund Program Grant No: OR16P027501-09 Replacement Housing Factor Grant No: Date of CFFP:	27501-09	FFY of G	FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant ☐ Original A ⊠ Performan	nnual Statement	☐ Revised Annua ⊠ Final Perform:	 ☐ Revised Annual Statement (revision no: ☑ Final Performance and Evaluation Report 	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost 1	Ost 1
		Original Revised ²	Obligated Exp	Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) 3	15,755.00	15,755.00	15,755.00
ပၪ	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)	7,877.50	7,877.50	7,877.50
S	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures	38,836.00	38,836.00	38,836.00
П	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures	16,306.50	16,306.50	16,306.50
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities 4			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

	Signatur	25	24	23	22	21	20	19	18ba	18a		Line	Perfo	Origi	Type of Grant	PHA Name: Housing Authority of Malheur County	Part I: Summary
Hall	е объежесь	Amount of	Amount of	Amount of	Amount of	Amount of	Amount of	1502 Conti	9000 Collat	1501 Collat		Summary	rmance and	Original Annual Statement	ant		ummary
My Williams	Signature of Executive Director Da	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 3/31/2011	Statement Reserve for Disasters/Emergencies		Grant Type and Number Capital Fund Program Grant No: OR16P027501-09 Replacement Housing Factor Grant No: Date of CFFP:	
	Date May 26, 2011													Emergencies			
	6, 2011						78				Original						
	Signatu						78,775.00				ıal	Total Estim					
	Signature of Public Housing Director										Revised ²	Total Estimated Cost	⊠ Fina	☐ Revis			
	sing Directo												d Performance	sed Annual St		FFY of Grant:2009 FFY of Grant Approval:	
	or .						78,775.00				Obligated	Total A		☐ Revised Annual Statement (revision no:		Approval:	
	Date May 26, 2011						78,775.00				Expended	Total Actual Cost 1)			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

				OR02701 - Non- Dwelling Improv.						OR02701 - Dwelling Improvements				PHA-Wide		Name/PHA-Wide Activities	Development Number	Part II: Supporting Pages PHA Name: Housing Authority of Malheur County
GRAND TOTAL	SUB TOTAL	Replace older fluorescent with Energy Star qualified CFL lights with lighting controls in common areas.	Remodel Administration Office Area	Non-Dwelling Improvements	SUB TOTAL	Replace Incandescent Lights	Replace vanity lighting with Energy Star CFL Lights	Replace tub/shower enclosures to include low flow faucets	Install water saving toilets	Dwelling Improvements	SUB TOTAL	Administration	SUB TOTAL	Operations		Categories	General Description of Major Work	
	1470	g 1470	1470	1470	1460	1460	Star 1460	lude 1460	1460		1410	1410	1406	1406			k Development	Grant Type and Number Capital Fund Program Grant No: OR16P027501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:
			1				17/2 Bdrs	17/2 Bdrs	17/2 Bdrs								Quantity	o: OR16P02750 Grant No:
78,775.00	16,306.50	3,403.25	12,903.25		38,836.00		3,570.00	29,316.00	5,950.00		7,877.50	7,877.50	15,755.00	15,755.00	Original		Total Estim	1-09
78,775.00	16,306.50	3,403.25	12,903.25		38,836.00	4,136.00	4,200.00	16,500.00	14,000.00		7,877.50	7,877.50	15,755.00	15,755.00	Revised 1	-	Estimated Cost	Federal F
78,775.00	16,306.50	3,403.25	12,903.25		38,836.00	4,136.00	4,200.00	16,500.00	14,000.00		7,877.50	7,877.50	15,755.00	15,755.00	Funds Obligated ²		Total Actual Cost	Federal FFY of Grant: 2009
78,775.00	16,306.50	3,403.25	12,903.25		38,836.00	4,136.00	4,200.00	16,500.00	14,000.00		7,877.50	7,877.50	15,755.00	15,755.00	Funds Expended ²		Cost	2009
						From 5 Yr Plan for total of 33 units	Reduction to 10 units	Reduction to 10 units	From 5 Yr Plan for total of 21 units								Status of Work	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name: Housing Authority of Malheur County	ty of Malheur County				Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
OR027001	3/31/2011	11/30/2010	9/12/2013	2/28/2011	
HA-Wide Dwelling	3/31/2011	11/30/2010	9/12/2013	2/28/2011	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226 Expires 4/30/2011

Part I: S	Part I: Summary				
PHA Name: Hou Malheur County	PHA Name: Housing Authority of Malheur County Grant Type and Number Capital Fund Program Grant No: OR 16P027501-10 Replacement Housing Factor Grant No: Date of CFFP:	027501-10		YAB ABB	FFY of Grant: 2010 FFY of Grant Approval:
Type of Grant ☐ Original A ☑ Performan	Type of Grant ☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☑ Performance and Evaluation Report for Period Ending: 3/31/2011	☐ Revised Annual Statement (revision no:☐ Final Performance and Evaluation Rep	ual Statement (revision no: mance and Evaluation Report	J	
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	ral Cost 1
		Original Revised ²	Obligated		Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	15,451.40		0.00	0.00
ω	1408 Management Improvements	54,079.90		0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	7,725.70		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
1	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

					(
				Signature of procedure of the party and with	Signa
Date May 26, 2011	o Director	Signature of Public Housing Director		nature of Evenitive Divertor Date May 26 2011	Ciono
			g	Amount of line 20 Related to Energy Conservation Measures	25
				Amount of line 20 Related to Security - Hard Costs	24
				Amount of line 20 Related to Security - Soft Costs	23
				Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
0.00	0.00		77,257.00	Amount of Annual Grant:: (sum of lines 2 - 19)	20
				1502 Contingency (may not exceed 8% of line 20)	19
				9000 Collateralization or Debt Service paid Via System of Direct Payment	18ba
				1501 Collateralization or Debt Service paid by the PHA	18a
Expended	Obligated	Revised ²	Original		
Total Actual Cost 1	Total Ac	Total Estimated Cost	Total Esti	Summary by Development Account	Line
	Final Performance and Evaluation Report			Performance and Evaluation Report for Period Ending: 3/31/2011	× P
	Revised Annual Statement (revision no:	Revised		Original Annual Statement Reserve for Disasters/Emergencies	
				Type of Grant	Type o
	FFY of Grant Approval:	AEE		PHA Name: Housing Authority of Malheur County Of Malheur County Date of CFFP: Grant Type and Number Capital Fund Program Grant No: OR16P027501-10 Replacement Housing Factor Grant No: Date of CFFP:	PHA N Housin of Mall
				Part I: Summary	Part I:

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages		Grant Type and Number			Federal	Federal FFY of Grant: 2010	010	
PHA Name: Housing Au	PHA Name: Housing Authority of Maineur County	Capital Fund Program Grant No: OR16P027501-10 CAPITAL Fund Program Grant No: OR16P027501-10 CFFP (Yes/No): Replacement Housing Factor Grant No:	r Grant No:	1-10	r coord	Cianto to		
Development Number Name/PHA-Wide	General Description of Major Work Categories	Vork Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406		15,451.40		0.00	0.00	
	SUB TOTAL	1406		15,451.40		0.00	0.00	
	Administration	1410		7,725.70		0.00	0.00	
	SUB TOTAL	1410		7,725.70		0.00	0.00	
PHA-Wide	Management Improvements	1408		54,079.90		0.00	0.00	
	Software & Hardware Replacement	nt						
	to be installed in the HAMC Admin/Ofc.	in/Ofc.				NAME OF STREET		
	SUB TOTAL			54,079.90		0.00	0.00	
	CRAND TOTAL			77.257.00				
	CIVALIA I CIVAL							

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name: Housing Authority of Malheur County	ty of Malheur County				Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
OR027001	3/31/2012		9/12/2014		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226 Expires 4/30/2011

Part I: Summary	ummary							
PHA Name: Hou Malheur County	PHA Name: Housing Authority of Malheur County	Grant Type and Number Capital Fund Program Grant No: OR16P027501-11 Replacement Housing Factor Grant No: Date of CFFP:	7501-11				Add	FFY of Grant: 2011 FFY of Grant Approval:
Type of Ga	Type of Grant ☑ Original Annual Statement ☐	Reserve for Disasters/Emergencies		10	Revised Annual Statement (revision no:	(revision no:	J	
- rerior	remormance and Evaluation report for remor commis-	or renou chang.		Total Fat	mated Cost		Total Actu	al Cast 1
Line	Summary by Development Account	ccount	O. S.	I otal Estimated Cost	nated Cost	Obligated	I otal Actual Cost	Expended
			Original		Kevised"	Obligated		Ехрепиеи
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) 3	ed 20% of line 21) 3	(64,363.50			0.00	
(J)	1408 Management Improvements	nts						
4	1410 Administration (may not exceed 10% of line 21)	exceed 10% of line 21)		7,151.50			0.00	
Si	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures							
11	1465.1 Dwelling Equipment—Nonexpendable	Nonexpendable						
12	1470 Non-dwelling Structures							
13	1475 Non-dwelling Equipment							
14	1485 Demolition							
15	1492 Moving to Work Demonstration	stration						
16	1495.1 Relocation Costs							
17	1499 Development Activities 4							

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Expires 4/30/2011

1		Signat	25	24	23	22	21	20	19	18ba	18a		Line	Pe	× 0,	Type of Grant	PHA Name: Housing Au of Malheur	Part I:
1000		ure of Ex	Amour	Amour	Amour	Amour	Amour	Amour	1502 C	9000 C	1501 C		Summ	rformance :	iginal Annı	Grant	PHA Name: Housing Authority of Malheur County	Part I: Summary
Me Julius C	H. Kinner	Signature of Executive Director Date July 14, 2011	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant:: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending:	Original Annual Statement Reserve for Disasters/Emergencies		Grant Type and Number Capital Fund Program Grant No: OR16P027501-11 Replacement Housing Factor Grant No: Date of CFFP:	Y
		14, 2011						71,5				Original	,		ies			
		Signatu						71,515.00					Total Estimated Cost					
		Signature of Public Housing Director										Revised ²	nated Cost	П	☐ Revis		5 5	
	1	sing Direc												Performan	sed Annual S		FFY of Grant:2011 FFY of Grant Approval:	
		tor						0.00				Obligated	Total	Final Performance and Evaluation Report	Revised Annual Statement (revision no:		t:2011 t Approval:	
		Date July 14, 2011						0.00				Expended	Total Actual Cost					

¹To be completed for the Performance and Evaluation Report.
²To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

	-	_	 		 -		 				_			 		
											PHA-Wide		Development Number Name/PHA-Wide Activities		rna Nane. nousing Au	Part II: Supporting Pages
GRAND TOTAL								SUB TOTAL	Administration	SUB TOTAL	Operations		General Description of Major Work Categories		Tha Name, housing admining of Mamem County	thoust of Milhour County
				6									Work	Replace	Capital	
								1410	1410	1406	1406		Account No.	CFFF (168 NO). Replacement Housing Factor Grant No:	Capital Fund Program Grant No: OR16P027501-11	Type and Number
													Quantity	Frant No:	lo: OR16P02750	
71,515.00								7,151.50	7,151.50	64,363.50	64,363.50	Original	Total Estimated Cost		1-11	
						34						Revised '	ited Cost		, cuci ai	Hadaral
								0.00	0.00	0.00	0.00	Funds Obligated ²	Total Actual Cost		i i di di ance	Rederal REV of Crant: 2011
								0.00	0.00	0.00	0.00	Funds Expended ²	Cost			111
													Status of Work			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing OMB No. 2577-0226

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name: Housing Authority of Malheur County	ity of Malheur County				Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
OR027001	3/31/2013		9/12/2015		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

\$71,515.00	\$71,515.00	\$71,515.00	\$71,515.00		Grand Total	M.
					Total Non-CFP Funds	ŗ
71,515.00	71,515.00	71,515.00	71,515.00		Total CFP Funds	K.
					Capital Fund Financing – Debt Service	J.
					Development	H
					Demolition	H.
64,363.50	64,363.50	64,363.50	64,363.50		Operations	G.
			1		Other	. H
7,151.50	7,151.50	7,151.50	7,151.50		Administration	E.
					PHA-Wide Non-dwelling Structures and Equipment	D.
					Management Improvements	C.
				XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Physical Improvements Subtotal	В.
Work Statement for Year 5 FFY 2015	Work Statement for Year 4 FFY <u>2014</u>	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 2 FFY 2012	Work Statement for Year 1 FFY 2011	Development Number and Name OR027001	P
Revision No:	⊠Original 5-Year Plan □F	Locality (City/County & State) Ontario, Malheur County, Oregon	Locality (City/County & State Ore	thority of	PHA Name/Number Housing Authority of Malheur County OR027	PHA Malh
					Part I: Summary	Par

						18tabapheph	// Actional Ac	7/// <i>864/////</i> Ot	HA (1)	Majo		Year 1 FFY	Statement for	Work	Part II: Support
Sub							Administration	Operations	HA WIDE	Major Work Categories	Number/Name	Development		_	ing Pages – Physi
Subtotal of Estimated Cost												Quantity	FFY 2012	Work Statement for Year 02	Part II: Supporting Pages – Physical Needs Work Statement(s)
\$71,515.00							7,151.50	64,363.50				Estimated Cost	3	12	ment(s)
Sul							Administration	Operations	HA WIDE	Major Work Categories	Number/Name	Development		V	
Subtotal of Estimated Cost												Quantity	FFY <u>2013</u>	Work Statement for Year: 03	
\$71,515.00	1						7,151.50	64,363.50				Estimated Cost		13	

\$71,515.00	Subtotal of Estimated Cost	Sub	\$71,515.00	Subtotal of Estimated Cost	Subto	
						//Statiensens///
7,151.50		Administration	7,151.50		Administration	- Associated - Ass
64,363.50		Operations	64,363.50		Operations	
		HA WIDE			HA WIDE	
		General Description of Major Work Categories			General Description of Major Work Categories	
		Number/Name			Number/Name	2009
Estimated Cost	Quantity	Development	Estimated Cost	Quantity	Development	Year 1 FFY
13	Work Statement for Year: <u>05</u> FFY <u>2015</u>	<		Work Statement for Year <u>04</u> FFY <u>2014</u>	¥	Work Statement for
			MCMe(S)	TITICOS VIOIN DIACO	borems rages raysic	T CHE THE CHI
			nent(s)	al Noods Work State	Part II: Sunnorting Pages - Physical Needs Work Statement(s)	Part II. Sun